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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☐ Declaration  
Submitted  
With Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)Attorney Docket  
Number

L3176-020

First Named Inventor

Woodall

**COMPLETE IF KNOWN**

Application Number

10/756,997

Filing Date

1/13/04

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEMIMETAL SEMICONDUCTOR

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 1/13/04

as United States Application Number or PCT International

Application Number 10/756,997 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
60/439,628	US	1/13/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
60/475,337	US	6/2/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
60/486,323	US	7/12/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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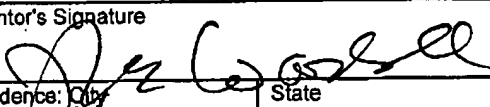
PTO/SB/01 (09-04)

Approved for use through 07/31/2006. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> The address associated with Customer Number: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>		OR <input checked="" type="checkbox"/> Correspondence address below	
<b>Name</b> Goodwin Procter LLP (attn: David Garrod, Ph.D., Esq.)			
<b>Address</b> 599 Lexington Avenue			
<b>City</b> New York		<b>State</b> NY	<b>ZIP</b> 10022
<b>Country</b> US	<b>Telephone</b> 212-459-7392	<b>Fax</b> 212-355-3333	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name (first and middle [if any])</b> Jerry M.		<b>Family Name or Surname</b> Woodall	
<b>Inventor's Signature</b> 		<b>Date</b> 10/19/04	
<b>Residence: City</b> New Haven	<b>State</b> CT	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 500 Prospect St 4F			
<b>City</b> New Haven	<b>State</b> CT	<b>Zip</b> 06511	<b>Country</b> USA
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name (first and middle [if any])</b> Eric S.		<b>Family Name or Surname</b> Harmon	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b>	<b>State</b>	<b>Country</b>	<b>Citizenship</b>
<b>Mailing Address</b>			
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Country</b>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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Customer Number:

OR

☒Correspondence  
address below

Name

Goodwin Procter LLP (attn: David Garrod, Ph.D., Esq.)

Address

599 Lexington Avenue

City

New York

State

NY

ZIP

10022

Country

US

Telephone

212-459-7392

Fax

212-355-3333

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☒

A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Jerry M.

Family Name or Surname

Woodall

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

Zip

Country

**NAME OF SECOND INVENTOR:**☐

A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Eric S.

Family Name or Surname

Harmon

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

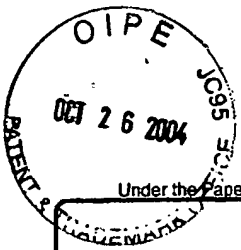
State

Zip

Country

☒

Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
David B.		Salzman	
Inventor's Signature <i>[Signature]</i>		Date <i>10/19/04</i>	
Residence: City <i>Cherry Chase</i>	State <i>MD</i>	Country <i>US</i>	Citizenship <i>US</i>
Mailing Address <i>4407 Elm Street,</i>			
City <i>Cherry Chase</i>	State <i>MD</i>	Zip <i>20815</i>	Country <i>US</i>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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